

Utah State Tax Commission
210 N 1950 W, Salt Lake City, Utah 84134
Utah Individual Income Tax Return


1999
TC-40
Rev. 12/99

Only fiscal filers should enter the beginning and ending dates of the fiscal year.
Beginning fiscal date _____, and Ending fiscal date _____.

**Send the original return.
Do not send photocopy.**

☐ **AMENDED RETURN**

See page 4 for "THE REASONS FOR
AMENDING" and enter the number in this box → ☐

 Label Here	Your Social Security number - -	L A B E L H E R E	Full name (first, middle initial, last)				<input type="checkbox"/> <input checked="" type="checkbox"/> if died in 1999 or 2000 (page 4)	
	Spouse's Social Security number - -		Spouse's name (first, middle initial, last)				<input type="checkbox"/> <input checked="" type="checkbox"/> if died in 1999 or 2000 (page 4)	
	Mailing address							
	City		State	ZIP code + 4	County			
	Foreign city		Foreign state & zip		Foreign country			
If you had a PREPRINTED label inserted at the center of the booklet, place it in this area. →								
Daytime telephone number ()								
Evening telephone number ()								

1. Filing status (page 4) a. <input type="checkbox"/> Single b. <input type="checkbox"/> Head of household c. <input type="checkbox"/> Married filing joint return d. <input type="checkbox"/> Married filing separate return e. <input type="checkbox"/> Qualifying widow(er) <i>If filing married joint or separate return, enter spouse's name and social security number in the address area above.</i>	2. Exemptions (enter the same number claimed on federal return) (page 4) a. <input type="checkbox"/> Yourself <i>If parents, or someone else, can claim you (or your spouse) as dependents, enter "0".</i> b. <input type="checkbox"/> Spouse c. <input type="checkbox"/> Other dependents d. <input type="checkbox"/> Disabled (attach form TC-40D) e. <input type="checkbox"/> Total exemptions	3. Election campaign fund (page 5) (Checking a party does not increase your tax or reduce your refund.) Yourself Spouse Democrat <input type="checkbox"/> A <input type="checkbox"/> Independent <input type="checkbox"/> B <input type="checkbox"/> American <input type="checkbox"/> C <input type="checkbox"/> Libertarian <input type="checkbox"/> D <input type="checkbox"/> Republican <input type="checkbox"/> No Contribution <input type="checkbox"/>
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INCOME	4. Federal adjusted gross income from federal return (Telefile Record line I, 1040EZ line 4, 1040A line 18, or 1040 line 33)(page 5) *	4	00
	5. State income tax deducted as an itemized deduction on your 1999 federal form 1040, Schedule A, line 5 (page 5)	5	00
	6. Enter entire amount of lump sum distribution reported on federal form 4972 (page 5)	6	00
	7. State taxes allocated from an estate or trust (page 5)	7	00
	8. Additions to income (page 6) • <input type="checkbox"/> MSA \$ _____ • <input type="checkbox"/> UESP \$ _____ • <input type="checkbox"/> Reimbursed \$ _____ Adoption expenses	8	00
	9. Total adjusted income (add lines 4 through 8)	9	00

DEDUCTIONS	10. Standard or itemized deduction (1040EZ and Telefile filers, must see page 6)	* 10	00
	11. Personal exemptions deduction (page 6) Multiply \$2,063 by exemptions on line 2e.	• 11	00
	12. Deduct one-half of the federal tax (page 6)	• 12	00
	13. State tax refund included on line 10 of federal form 1040 (page 6)	• 13	00
	14. Retirement exemption/deduction Check box if age 65 or older • <input type="checkbox"/> Taxpayer is 65 or older • <input type="checkbox"/> Spouse is 65 or older	• 14	00
	15. Interest from U. S. government obligations deduction (page 7)	• 15	00
	16. MSA and UESP deductions (page 8) • <input type="checkbox"/> MSA \$ _____ • <input type="checkbox"/> UESP \$ _____	• 16	00
	17. Health Care Insurance Premium deduction (page 8)	• 17	00
	18. Other deductions (page 8) • <input type="checkbox"/> Adoption exp. \$ _____ • <input type="checkbox"/> R.R. Retire. \$ _____ • <input type="checkbox"/> Native Amer. income \$ _____ • <input type="checkbox"/> Other \$ _____	* 18	00
	19. Total deductions (add lines 10 through 18)	19	00

TAX	20. Utah 1999 taxable income (subtract line 19 from line 9) If less than zero, enter zero.	• 20	00
	21. CALCULATE INCOME TAX (MUST READ INSTRUCTIONS on page 8) Worksheet on page 17.	• 21	00
	22. FOR NON OR PART-YEAR RESIDENTS ONLY - Use form TC-40A, PART 3. Check "Nonresident" or "Part-year resident" below. <input type="checkbox"/> Nonresident. Home state initials are: _____ <input type="checkbox"/> Part-year resident from ____ / ____ / 99 to ____ / ____ / 99 Information in the boxes below are from state form TC-40A, Part 3. (page 9) Box a. From Column A, line h ÷ Box b. From Column B, line h = Box c. Utah income tax ratio * 22 00 Non or Part-year Residents must attach a copy of their FEDERAL RETURN.		
	23. Utah use tax (page 9)	• 23	00
	24. Subtotal - Utah income tax and use tax (see page 9). UTAH RESIDENTS: Add lines 21 and 23. NON OR PART-YEAR RESIDENTS: Add lines 22 and 23.	24	00

CONTINUE ON LINE 25

CONTINUE ON LINE 25

CONTINUE ON LINE 25

Attach W-2 and other withholding forms here

25. Enter amount from line 24 (Subtotal - Utah income tax and use tax)		25	00
26. Contributions (page 9)			
26a. Homeless trust fund		● 26a	00
26b. Kurt Oscarson Children's organ transplant fund		● 26b	00
26c. Utah nongame wildlife fund		● 26c	00
26d. State colleges and universities College code ● 		● 26d	00
26e. Nonprofit school district foundation School district code ● 		● 26e	00
Total contributions (add lines 26a through 26e)		26	00
27. AMENDED RETURNS ONLY - previous refunds (page 10)		● 27	00
28. Total tax and contributions (add lines 25, 26, and 27)		28	00
29. UTAH TAX WITHHELD (must attach W-2 and/or 1099 forms) (page 10)		★ 29	00
30. FULL OR PART-YEAR RESIDENTS ONLY - Credit for income tax paid to another state (page 10) (use form TC-40A, Part 1)		● 30	00
31. Credit for Utah income taxes prepaid (page 10)		● 31	00
32. AMENDED RETURNS ONLY - previous payments (page 10)		● 32	00
33. Nonrefundable credits (pages 10 through 12)			
33a. Renewable energy systems tax credit (attach TC-40E)		● 33a	00
33b. Clean fuel alternative credit (attach TC-40F)		● 33b	00
33c. Clean fuel vehicle credit (attach TC-40V)		● 33c	00
33d. Historic preservation credit (attach TC-40H)		● 33d	00
33e. Enterprise zone credit		● 33e	00
33f. Qualified sheltered workshop cash contribution credit Name of workshop _____ Total cash contribution x 50% (maximum credit is \$200)		● 33f	00
33g. Low income housing credit (see instructions for required forms)		● 33g	00
33h. Tax credits for employers who hire persons with disabilities (attach TC-40HD)		● 33h	00
33i. Recycling market development zones (attach TC-40R)		● 33i	00
33j. Tutoring tax credit for disabled dependents		● 33j	00
Total nonrefundable credits (add lines 33a through 33j)		33	00
UTAH RESIDENT: The total nonrefundable credits on line 33 cannot exceed the amount on line 21 less line 30. NON or PART-YEAR RESIDENT: The total nonrefundable credits on line 33 cannot exceed the amount on line 22 less line 30.			
34. Other credits (page 12)			
34a. Mineral production withholding tax credit (attach TC-675R and/or K-1)		● 34a	00
34b. Agricultural off-highway gas/undyed diesel tax credit. Gallons _____ X .245		● 34b	00
34c. NON or PART-YEAR RESIDENTS ONLY Nonresident shareholder's withholding tax credit Federal ID number - 		● 34c	00
Total other credits (add lines 34a through 34c)		34	00
35. Total withholding and credits (add lines 29, 30, 31, 32, 33, and 34)		35	00
36. Tax due - If line 28 is larger than line 35, subtract line 35 from line 28. This is the amount you owe. (page 13)		TAX DUE ☹️ 36	00
The Tax Commission will bill the taxpayer if any penalty and interest is owed. See page 13 about payment agreements.			
37. Refund - If line 35 is larger than line 28, subtract line 28 from line 35. This is your refund. (page 13)		REFUND 😊 37	00
Apply my refund to my 2000 taxes. I understand that I will NOT receive a refund this year. (page 13)		● 	
If this is an AMENDED return, you cannot apply your refund to next year's tax liability.			
DIRECT DEPOSIT: To have your refund directly deposited into your account, provide the routing and account information below (See page 13).			
Routing number 		Account number 	
What type of account is it?		<input type="checkbox"/> Checking account <input type="checkbox"/> Savings account	
Under penalties of perjury, I declare that to the best of my knowledge and belief, this return and accompanying schedules reflect my true tax status.			
Your signature _____		Date signed _____ Occupation _____	
Spouse's signature (if filing jointly, both MUST sign even if only one had income) _____		Date signed _____ Occupation _____	
Paid Preparer's Section	Paid preparer's signature _____		Date signed _____
	Firm's name (or yours if self-employed) _____		Check if self-employed <input type="checkbox"/>
	Paid preparer's complete address _____		Preparer's Social Security no. or PTIN _____ E.I. number _____ Telephone number _____ City _____ State _____ ZIP code _____